Store Name/Location:	Date:/ Quarter:
Total Quarterly Hours Reported:	Quarterly Hours for Minors:

Incident Tracking Form

The following tool is intended to collect some basic information about the occurrence of injury incidents that do not result in a worker's compensation claim. To more accurately assess the true impact of an injury prevention strategy, a more complete picture of the occurrence of injuries is needed. Most injuries that occur in the workplace do not result in the need for workers' compensation, but the event reflects risk factors that may be addressed by an intervention aimed at reducing all injuries. This information is for informational purposes only and will not be used for anything outside of this focused intervention project.

Date	Check One		Job Task	Body Part	Type of	Injury Event	Injury Source	Slip-	Treatment*	Briefly describe how
	Under 18 yr	18 yr or over	(Food prep, grill, counter, etc.)	Injured (hand, arm, face, eye, back, etc.)	Injury (cut, burn, sprain, etc.)	(Slip, fall, lifting, burn over- exertion, etc)	(hot object, oil, knife, floor, ladder, etc.)	Resistant shoes Y/N	(band-aid, ice, other first-aid, doctor visit, hospital, none)	the injury happened